

PREVENTION, RETENTION, AND CONTINGENCY PROGRAM (PRC) APPLICATION

Name of Applicant	Case Number
Present Address	Phone number where we can contact you

1) What is the emergency with which you need help?

☐ Rent/Mortgage
Amount needed _____

☐ Rental Security Deposit
Amount needed _____

☐ Utilities
Amount needed _____

☐ Car Repairs (if employed)
Amount needed _____

☐ Household items, disaster ONLY (specify) _____
Amount needed _____

☐ Other (specify) _____
Amount needed _____

2) Why do you need help with this cost? Please explain in detail.

3) Have you contacted anyone else for help?

Who? _____

☐ YES
☐ NO

4) Status of your housing in Columbus Metropolitan Housing Authority (CMHA), Section 8, or subsidized housing:

☐ Confirmed
☐ Pending
☐ Not applicable

5) Complete the chart below for everyone living in your home, including yourself. You must verify all household income received in the last 30 days for all members of your household. In addition, for a shelter request, you must verify all household income for the next 30 days for all members of the household.

Name	Age	Relationship to Applicant	Social Security Number	Total Monthly Income	Source of Income
		SELF			

Please understand that the completion of this form is not a guarantee that funds will be paid.

By signing, you grant permission for the FCDJFS to gather and report information as needed in the process.

Signature of Applicant	Date
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THIS SIDE FOR AGENCY USE ONLY

Date Application received by Agency _____

Has PRC assistance been received within last 12 months?

YES NO

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Date	Amt.	Item/Service

Are additional verifications needed?

YES NO

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If yes, date 7105 sent _____

Are the following items verified?

- Household composition
- Social security number for each PRC AG member
- Citizenship for each PRC AG member
- Income

		(1)
		(2)
		(3)
		(4)

Is anyone in the household on sanction?

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Are Community Resources available?

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Are the following items attached to PRC package to Finance?

- Verification of amount owed and any related documentation
- Proof of eviction proceedings (if appropriate)
- Completed W-9 (for new vendors only)
- Screen print of AEIID and, if woman pregnant, AEIIA
- Screen print of CLRC
- Screen print of open Emergency Assistance category in CRISE

		(1)
		(2)
		(3)
		(4)
		(5)
		(6)

NOTES:

Type of PRC Determination	Number in Household	Total Household Countable Income	Need Standard	Rent or Mortgage 75% or Less of Countable Income? Yes/No
Income Eligibility Determination ; 30 days back from PRC DOA				Not Applicable
Sustainability Eligibility Determination (for shelter request ONLY) ; 30 days forward from PRC DOA				

☐ PRC Approved

Item/Service Provided	Date Approved	Amount	Vendor Name/Address

☐ PRC Denied

Date of Denial _____
Date Notice Mailed _____

Reason for Denial _____

Signature of Case Manager _____

Signature of Supervisor _____

Date EA F screen opened _____

Date CLRC notated _____

Signature of Center Director _____
(Required for confidential PRCs)